CERTIFICATE OF MAILING

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PAYMENT OF FEE

Address to: Mail Stop Non-Fee Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

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Application Number	09/887,552 -		
Confirmation Number	5854		
Filing Date	June 21, 2001		
First Named Inventor	Michael W. Leviten		
Examiner	Peter Paras Jr.		
Group Art	1632		
Title	Transgenic Mice Containing Cerberus Gene Disruptions		
Attorney Docket No.	R-67		

Dear Mr. Paras:

In response to the notice titled "Informality Re Payment of Fee" dated July 3, 2003, Applicants hereby submit payment of the balance due associated with the response to the Office Action dated December 19, 2002, which response was filed June 19, 2003, requesting an extension of time of three (3) months. Please find enclosed a check in the amount of \$465.00, which covers the balance due. Applicants believe all outstanding fees associated with the filing of the response to the Office Action dated December 19, 2002 have been paid.

The Commissioner is hereby authorized to charge any underpayment of fees associated with this communication, or credit any overpayment, to Deposit Account No. 50-1271.

08/07/2003 DTESSEM1 00000142 09887552

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465.00 OP

Date:

Respectfully submitted, DELTAGEN, INC.

Kelly L. Ouast

Registration No. 52,141

DELTAGEN, INC. 700 Bay Road

Redwood City, CA 94063 Telephone: (650) 569-5100 Facsimile: (650) 569-5280



United States Patent and Trademark Office

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FIRST NAMED INVENTOR CONFIRMATION NO. ATTORNEY DOCKET NO. FILING DATE APPLICATION NO. 5854 Michael W. Leviten 09/887,552 06/21/2001 7590 07/03/2003 DELTAGEN, INC. **EXAMINER** 1003 Hamilton Avenue PARAS JR, PETER lenlo Park, CA 94025 ART UNIT PAPER NUMBER 1632 DATE MAILED: 07/03/2003

Please find below and/or attached an Office communication concerning this application or proceeding.

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Address: COMMISSIONER OF PATENTS AND TRADEMARKS Washington, D.C. 20231

SERIAL NUMBER FILING DATE FIRST NAMED APPLICANT ATTORNEY DOCKET NO. **EXAMINER ART UNIT** PAPER NUMBER TECH CENTER TO THE MERITAMEN DATE MAILED: INFORMALITY RE PAYMENT OF FEE The informality regarding the payment of the fee in connection with ___ the original filing fee ____ _____ is indicated below. A. FEE DUE 1. The amendment is considered incomplete in that the funds in Deposit Account No. are insufficient to cover the entire fee due. The balance is due within the period set below. 2. The amendment is considered an incomplete response, in that payment of \$_____ ____ is insufficient to cover the claims as shown in the attached Patent Application Fee Determination Record. Remittance is due within the period set below. 3. The amendment has not been entered, since applicant has failed to remit (or authorize charge to a Deposit Account) the fee as indicated on the attached Patent Application Fee Determination Record. Remittance or authorization is due within the period set below. 4. The filing fee of \$______ submitted in this application is insufficient.

A balance of \$_\frac{465.00}{} is due for additional claims. 5. APPLICANT IS GIVEN THE REMAINDER OF THE SET PERIOD FOR RESPONSE, OR ONE (I) MONTH FROM THE DATE OF THIS LETTER, WHICHEVER IS LONGER, WITHIN WHICH TO REMIT THE FEE OF \$ 465.00 B. EXCESS PAYMENT: 5. It is noted that payment of \$_____ is in excess of the amount necessary to cover the claims now in the application. See the attached Patent Application Fee Determination Record. This matter of refund or credit to your account is being referred to the Finance Officer, for his consideration.

PTOL-319 (REV. 3-82)

USCOMM-DC 82-3838-P82